#### Edgar Filing: ACNB CORP - Form 4

ACNB CORP

Form 4 March 30, 201	5											
									OMB AF	PROVAL		
FORM	UNIII	ED STAT			ND EXC D.C. 205		IGE CO	OMMISSION	OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or				ES IN E SECURI		CIAL	L OWN	ERSHIP OF	Expires: Estimated a burden hou response			
Form 5 obligations may contin <i>See</i> Instruct 1(b).	ue. Section	17(a) of th	o Section 16( he Public Util h) of the Inve	ity Hold	ing Com	bany	Act of 1	1935 or Section	·	0.0		
(Print or Type Re	sponses)											
1. Name and Address of Reporting Person <u>*</u> Cathell David W			Symbol						5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	3. Date of E	_	_			(Check	all applicable	)		
465 IDAVILI ROAD	× ,	, ,	(Month/Day 03/27/201	y/Year)	insaction			Director _XOfficer (give pelow) EVP, T		Owner er (specify O		
				Filed(Month/Day/Year)				<ul><li>6. Individual or Joint/Group Filing(Check</li><li>Applicable Line)</li><li>_X_ Form filed by One Reporting Person</li></ul>				
GARDNERS	, PA 17324						Ī	Form filed by Me Person	ore than One Re	porting		
(City)	(State)	(Zip)	Table	I - Non-De	erivative S	ecurit	ies Acqui	ired, Disposed of,	or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transactio (Month/Day/	Year) Exe any	Deemed cution Date, if onth/Day/Year)	Code (Instr. 8)	4. Securi ior(A) or D (Instr. 3,	ispose 4 and (A) or	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
ACNB Corporation Common	03/27/201	5		Р	265	A	\$ 20.44	11,236.3369 (1)	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

# **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
I G G G G G G G G G G G G G G G G G G G	Director	10% Owner	Officer	Other			
Cathell David W			EVP,				
465 IDAVILLE YORK SPRINGS ROAD			Treasurer &				
GARDNERS, PA 17324			CFO				
Signatures							

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/s/ David W.	03/30/2015			
Cathell	05/50/2015			

\*\*Signature of **Reporting Person**  Date

## **Explanation of Responses:**

- If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

The amount of securities beneficially owned includes 14.298806 shares of common stock acquired to date as of this filing through the (1) automatic reinvestment of dividends under the ACNB Corporation Dividend Reinvestment and Stock Purchase Plan, which are exempt from the reporting requirements of Section 16 of the Securities Exchange Act of 1934.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.